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LISTING OF CLAIMS:

The listing of claims will replace all prior versions, and listings, of claims in the application.

Claims 1-11 (cancel)

Claim 12 (New) A surgical device for providing a working passage through tissue, the surgical device comprising:

an elongate tubular member having proximal and distal openings defining a bore therethrough; and

at least two wall segments disposed on said tubular member, each wall segment having an uninflated state and an inflated state wherein the at least two wall segments are longitudinally spaced apart on said tubular member.

Claim 13 (New) The surgical device of claim 12, wherein the bore is dimensioned to receive an endoscopic instrument.

Claim 14 (New) The surgical device of claim 12, wherein each wall segment extends circumferentially about the tubular member.

Claim 15 (New) The surgical device of claim 12, wherein a surface of each wall segment is

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substantially flush with an exterior surface of said tubular member when said wall segment is in the uninflated state.

Claim 16 (New) The surgical device of claim 12, wherein each wall segment has an outside diameter greater than an outside diameter of the tubular member when said wall segment is in the inflated state.

Claim 17 (New) The surgical device of claim 12, wherein when the at least two wall segments are in the inflated state, the at least two wall segments define a gap therebetween.

Claim 18 (New) The surgical device of claim 17, wherein the at least one layer of tissue is captured by said gap.

Claim 19 (New) A method of positioning a surgical access device through tissue of a patient, the method comprising the steps of:

inserting the surgical access device through tissue, said surgical access device comprising:

an elongate tubular member having proximal and distal openings defining a bore therethrough; and

first and second wall segments disposed on said tubular member, each wall segment having an uninflated state and an inflated state wherein the first and second wall segments

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are longitudinally spaced apart on said tubular member;

introducing a fluid under pressure to the first wall segment causing it to go from its uninflated state to its inflated state; and

positioning said surgical access device such that at least a portion of the first wall segments is in contact with tissue.

Claim 20 (New) The method of claim 19, wherein said bore is dimensioned to accommodate an endoscopic instrument.

Claim 21 (New) The method of claim 19, further comprising the step of:
introducing a fluid under pressure to the second wall segment causing it to go from its uninflated state to its inflated state and defining a gap between said first and second wall segments.

Claim 22 (New) The method of claim 21, wherein at least one layer of tissue captured in said gap.